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Bib Data Sheet

CONFIRMATION NO. 5641

<b>SERIAL NUMBER</b> 10/758,429	<b>FILING OR 371(c) DATE</b> 01/16/2004 <b>RULE</b>	<b>CLASS</b> 235	<b>GROUP ART UNIT</b> 2876	<b>ATTORNEY DOCKET NO.</b> 64243.000006
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**APPLICANTS**  
 Merrill Brooks Smith, Atlanta, GA;  
 Phillip Craig Graves, Atlanta, GA;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of 10/253,243 09/24/2002 which claims benefit of 60/324,333 09/24/2001 and claims benefit of 60/396,404 07/15/2002  
 This application 10/758,429  
 claims benefit of 60/519,630 11/14/2003  
 and claims benefit of 60/519,629 11/14/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 04/27/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>YS</i>	<b>STATE OR COUNTRY</b> GA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 70	<b>INDEPENDENT CLAIMS</b> 8
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**ADDRESS**  
27682

**TITLE**  
System and method for conducting a refund transaction for a pin-activated account

<b>FILING FEE RECEIVED</b> 1050	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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